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CONFIRMATION NO. 1673

Bib Data Sheet

SERIAL NUMBER 10/750,303	FILING OR 371(c) DATE 12/30/2003 RULE	CLASS 424	GROUP ART UNIT 1616	ATTORNEY DOCKET NO. 00029.10CON
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APPLICANTS

Joshua D. Rabinowitz, Mountain View, CA;
 Alejandro C. Zaffaroni, Atherton, CA;

**** CONTINUING DATA *******

This application is a CON of 10/152,639 05/20/2002 PAT 6,716,416
 which claims benefit of 60/294,203 05/24/2001
 and claims benefit of 60/317,479 09/05/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****

** 05/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

37485

TITLE

Delivery of antipsychotics through an inhalation route

FILING FEE RECEIVED 597	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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